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Learning Objectives

Upon completion of the activity, participants should be able to:

• Describe current adult immunization recommendations
• Review strategies for improving adult immunization rates
• Develop plans for incorporating these strategies in clinical practice
Instructions

• Get into groups of 2

Instructions

• Use the answer sheet to answer the questions
• Keep track of your right answers (there may be a prize at the end)

Instructions

• Feel free to interrupt if you disagree with the answer
1. Which of the following is the correct pneumococcal vaccine recommendation for a 35-year-old cigarette smoker (1 pack-a-day) with no other medical conditions?

A. PCV13 (1 dose)
B. PPSV23 (1 dose)
C. PCV13 (1 dose) followed by PPSV23 at least 1 year later
D. PPSV23 (1 dose) followed by a second dose 5 years later

2. A 65-year-old with asthma received 1 dose of PPSV23 at age 50. What pneumococcal vaccine is recommended now?

A. PCV13 (1 dose) followed by PPSV23 at least 1 year later
B. PPSV23 (1 dose) followed by PCV13 at least 1 year later
C. PCV13 (2 doses, separated by 6-12 months)
D. No additional pneumococcal vaccination(s) indicated
2. A 65-year-old with asthma received 1 dose of PPSV23 at age 50. What pneumococcal vaccine is recommended now?

A. PCV13 (1 dose) followed by PPSV23 at least 1 year later
B. PPSV23 (1 dose) followed by PCV13 at least 1 year later
C. PCV13 (2 doses, separated by 6-12 months)
D. No additional pneumococcal vaccination(s) indicated

3. What is the current pneumococcal recommendation for a healthy adult, age 67 who has received no previous pneumococcal vaccination?

A. PCV13 (1 dose)
B. PPSV23 (1 dose)
C. PCV13 (1 dose) followed by PPSV23 at least 1 year later
D. PPSV23 (1 dose) followed by a second dose 5 years later
4. You have just given a 20-year-old college student with Hodgkin’s disease 1 dose of PCV13. What is the schedule for additional pneumococcal vaccines for this patient?

A. A second dose of PCV13 in 6-12 months
B. A second dose of PCV13 in 6 months, then PPSV23 5 years later
C. PPSV23 (1 dose) 5 years later
D. PPSV23 in 8 weeks, then a second dose of PPSV23 5 years later

5. Which vaccine should be used to complete the series if a 21-year-old female has previously received 2 doses of 4vHPV?

A. 2vHPV or 4vHPV
B. 4vHPV
C. 4vHPV or 9vHPV
D. 2vHPV, 4vHPV, or 9vHPV
5. Which vaccine should be used to complete the series if a 21-year-old female has previously received 2 doses of 4vHPV?

A. 2vHPV or 4vHPV
B. 4vHPV
C. 4vHPV or 9vHPV
D. 2vHPV, 4vHPV, or 9vHPV

6. True or False? Pregnancy testing is recommended before HPV vaccination.

A. True
B. False
7. Which statement best describes the primary benefit of vaccinating males and females against HPV?
   A. Reduce sexual promiscuity
   B. Prevent genital warts
   C. Prevent transmission of sexually transmitted disease
   D. Cancer prevention

8. Which influenza vaccine is recommended for adults with severe egg allergy?
   A. High dose inactivated influenza vaccine (IIV)
   B. Intradermal IIV
   C. Live attenuated influenza vaccine (LAIV)
   D. Recombinant influenza vaccine (RIV)
8. Which influenza vaccine is recommended for adults with severe egg allergy?
   A. High dose inactivated influenza vaccine (IIV)
   B. Intradermal IIV
   C. Live attenuated influenza vaccine (LAIV)
   D. Recombinant influenza vaccine (RIV)

9. Live attenuated influenza vaccine (LAIV) is recommended for:
   A. All adults
   B. Pregnant women
   C. Adults under the age of 65 years
   D. Healthy, non-pregnant persons aged 2 to 49 years
10. What is the optimal timing for giving influenza vaccines?
   A. Late summer
   B. Fall
   C. Mid-winter
   D. Any time during the year, no seasonal preference

Status Check

• How many people have gotten all 10 correct so far?
11. According to the CDC, influenza vaccination coverage among health care personnel in the US during the 2013-2014 influenza season was:
   A. 90%
   B. 75%
   C. 45%
   D. 30%

12. According to the CDC, influenza vaccination coverage among pregnant women during the 2013-2014 influenza season was:
   A. 89%
   B. 70%
   C. 52%
   D. 37%
12. According to the CDC, influenza vaccination coverage among pregnant women during the 2013-2014 influenza season was:

A. 89%
B. 70%
C. 52%
D. 37%

13. According to a survey of pregnant women conducted for the CDC during the 2013-2014 influenza season, how many had received a clinician recommendation and offer of influenza vaccination?

A. 90%
B. 85%
C. 65%
D. 35%
14. Select the correct statement regarding zoster vaccination:
   A. Not needed for older adults who have had shingles
   B. Not needed in patients who had chicken pox before age 10
   C. ACIP recommended for adults ≥ 50 years
   D. ACIP recommended for adults ≥ 60 years

15. A woman is pregnant with her second child. She received a Tdap vaccine during her first pregnancy exactly 24 months ago. What is the recommendation for Tdap vaccine for this expectant mother?
   A. No additional Tdap vaccine is recommended
   B. Tdap vaccine before 12 weeks gestation
   C. Tdap vaccine, preferably during 27 to 36 weeks gestation
   D. Tdap vaccine after delivery
15. A woman is pregnant with her second child. She received a Tdap vaccine during her first pregnancy exactly 24 months ago. What is the recommendation for Tdap vaccine for this expectant mother?

A. No additional Tdap vaccine is recommended  
B. Tdap vaccine before 12 weeks gestation  
C. Tdap vaccine, preferably during 27 to 36 weeks gestation  
A. Tdap vaccine after delivery

16. The parents (ages 57 and 58) of the pregnant woman in the previous question plan to care for their 2 grandchildren after the new baby is born. They both received tetanus shots (Td) in the last year. Which of the following is the appropriate recommendation for these grandparents?

A. A dose of Tdap instead of Td in 10 years  
B. A second dose of Td before caring for the newborn  
C. 1-time dose of Tdap before caring for the newborn  
D. 1-time dose of DTaP before caring for the newborn
17. Which tetanus-containing vaccine should be given to an adult with uncertain vaccination status?

A. Td  
B. Tdap  
C. Tdap followed by Td 6-12 months later  
D. Td followed by Tdap 6-12 months later

Status Check

• How many people have gotten at least 15 correct so far?
18. What is the meningococcal vaccine recommendation for adult patients with anatomical or functional asplenia?

A. MenACWY (MCV4), 2 doses at least 2 months apart AND Men B according to specific vaccine label
B. MenACWY (MCV4), single dose
C. MPSV4 single dose

19. What are the current hepatitis B vaccination recommendations for unvaccinated adults with diabetes?

A. Give the 3 dose series as soon as possible after either Type 1 or Type 2 diabetes diagnosis
B. Vaccinate patients with Type 1 diabetes (not Type 2)
C. Vaccinate patients with Type 2 diabetes (not Type 1)
D. Give the 3 dose series to patients with either Type 1 or Type 2 diabetes and HbA1C ≥ 7%
19. What are the current hepatitis B vaccination recommendations for unvaccinated adults with diabetes?

A. Give the 3 dose series as soon as possible after either Type 1 or Type 2 diabetes diagnosis
B. Vaccinate patients with Type 1 diabetes (not Type 2)
C. Give the 3 dose series to patients with either Type 1 or Type 2 diabetes and HbA1C ≥ 7%

20. According to the ACIP, which of the following vaccines should be recommended for a 50-year-old patient with cardiomyopathy?

A. Live attenuated influenza vaccine (LAIV)
B. Inactivated influenza vaccine (IIV), PCV13, and zoster
C. LAIV and PPSV23
D. IIV and PPSV23
21. Which of the following vaccines can be administered at the same visit?

A. Zoster and inactivated influenza vaccine (IIV)
B. High-dose IIV and PPSV23
C. Tdap, IIV, and PPSV23
D. Each of the combinations listed above can be administered at the same visit

And The Winner Is...
A 28-year-old Medical Student Sees an 8-year-old Child in her Teaching Clinic with Chickenpox

- Because the parents of the child did not think chickenpox was a serious disease, they preferred not to have him vaccinated for “personal reasons.”
- Since the medical student had had chickenpox as a child, she was not too concerned about being exposed to the child with chickenpox.
- 14 days later, the medical student develops a very painful area on her right foot along a dermatome. There was no itch and no history of trauma. The next morning the foot developed a maculopapular rash along the foot dermatome and remained very painful.
- Further history from the medical student indicated she might be pregnant. Her Ob-Gyn was contacted and the medical student was started on an antiviral agent.
- The long-term outcome is unknown.

Implementation Workshop

5’ Introduction and Short Case
25’ Moderator facilitated small group discussion
5’ Develop an action plan (individual or in pairs)
15’ Large group sharing of plans
5’ Evaluation
Small Group Discussion
Please Break Into Work Groups
With your neighbor, turn around and form a team of 4 with the two neighbors behind you
If you are not matched up with a group, join a group that is closest to you
Goal is groups of 4-6

25 MINUTES

Small Group Discussion
• Share experiences and compare practices within your group
• Discuss applicable strategies for your practice setting
• Identify plans and questions for large-group discussion

Step 1 – IAC Survey
• Suggestions to improve your immunization services
• Take this back to your clinical practice and complete the survey with your colleagues
STEP 2 – ACTION PLAN
Individual Commitment to Change

- Identify your goal(s) for improving adult immunization rates in your practice environment
- Indicate the strategies that you plan to implement to achieve your goal(s)

Facilitated Large Group Discussion

- Most common barriers or opportunities for improvement (show of hands)
- Which group would like to share issues discussed?
- What were some strategies that you feel can be incorporated into your practice setting that will make a difference?
- Who are the key players to help you implement changes?
- What are challenges that you anticipate?
- Ideas for how to address challenges?
- Questions?

Choose an Accountability Partner from Your Small Group

- Invite a partner who you’ll check-in on, to encourage each other to continue to pursue your action-plan goal
- Share contact information
- Commit to follow-up with specific date
Please Complete and Return

1. STEP 2 – Keep the top sheet, return the carbon copy of your action plan

2. Activity evaluation
Tools and Resources

CDC Vaccines & Immunizations: http://www.cdc.gov/vaccines/default.htm
Immunization Schedules: http://www.cdc.gov/vaccines/schedules/index.html
ACIP Immunization Advisor: http://immunization.cdc.gov/app/

ADULT Vaccination Clinic Resources: http://www.immunize.org/handouts/adult-vaccination.asp

Tools and Resources Cont.

Standing Orders: http://www.immunize.org/standing-orders/
The 4 Pillars™ Immunization Toolkit: http://www.4pillarstoolkit.pitt.edu/home
Seasonal Influenza Vaccination Resources for Health Professionals: http://www.cdc.gov/flu/professionals/vaccination/index.htm
Shingles (Herpes Zoster): http://www.cdc.gov/shingles/hcp
Human Papillomavirus (HPV): http://www.cdc.gov/hpv/resources.html
Pneumococcal Disease: http://www.cdc.gov/pneumococcal/district/prevention.html
Vaccines for Pregnant Women: http://www.cdc.gov/vaccines/adults/rec-vac/pregnant.html
You Call The Shots: http://www.cdc.gov/vaccines/hcp/youcalltheshots.htm

Please visit AdultVaccinesCME.org for more education